	PATENT A		09/809,768 57940. 100002										
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	. Ei	NTITY	OR	OTHER SMALL	
TC	TAL CLAIMS		$\partial \rho$		* 100 a 200			RATI	E	FEE	1	RATE	FEE
FOR .			NUMBER FILED		NUMBER EXTRA			BASIC	FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			∂ 0 minus 20=		. 0			X\$ 9=			OR	X\$18=	
INDEPENDENT CLAIMS			2 mi	nus 3 =	Ø			X40=			OR	X80=	
MU	LTIPLE DEPEN	IDENT CLAIM P	RESENT				+135=			1	+270=		
* If the difference in column 1 is less than zero, enter "0" in column 2										200	OR		
								TOTA	NL	355	OR	OTHER	TUAN
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMAI	LL i	ENTITY	OR	SMALL	
NT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVK PAID	BER OUSLY	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	· Je	Minus	9	む	=	ı	X\$ 9	=		OR	X\$18=	
ME	Independent	. 2	Minus		3	= /	Ì	X40=		/	OR	X80=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM /							+135	<u> </u>		OR	+270=	
							Ļ	TOT ADDIT, F				TOTAL	
	(Column 1) (Column 2) (Column 3)								EE (ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST IBER OUSLY	PRESENT EXTRA		RATE	Ξ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	••		=		X\$ 9:	=		OR	X\$18=	
	Independent	•	Minus	***		=		X40=			OR	X80=	
	FIRST PRESE	NTATION OF MI	JLTIPLE DEPENDENT CLA				ŀ	. 125				+270=	
							L	+135:			OR	TOTAL	
. 3								ADDIT. F			OR	ADDIT. FEE	
	(Column 1) (Column 2) CLAIMS HIGHEST					(Column 3)	-		_	1001	1 1		
AMENDMENT C		REMAINING AFTER AMENDMENT	21.21	NUM PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	=	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=	X\$ 9		_		OR	X\$18=	
	Independent	•	Minus	***		-	ŀ	X40=				X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								\dashv		OR		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											OR	+270=	
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL ADDIT. FEE ADDIT. FEE												L	
		ther Previously Pa					tour	nd in the	ann	ropriate bo	r in co	tumn 1.	

Application or Docket Number